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Update

An Update on Graduate Medical Education Regulations-2023

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There has been a paradigm shift in Medical Education in India since the introduction of the Graduate Medical Education Regulations (GMER) 2019 by the National Medical Commission (NMC). A new set of GMER was released and gazetted in the year 2023. In this short report, the authors have summarized the changes in GMER 2023 with reference to GMER 2019.

Keywords: Graduate Medical Education Regulations, National Medical Commission, Competency-Based Medical Education

The Graduate Medical Education Regulations (GMER) 2023 were gazetted via a notification dated June 2, 2023.[1] Following this, the Under Graduate Medical Education Board (UGMEB) of the National Medical Commission (NMC) issued a new set of Competency-Based Medical Education (CBME) guidelines for MBBS training in India.[2] However, these guidelines were withdrawn within a few days.[3] Based on the comments and suggestions received from concerned stakeholders, the UGMEB published revised CBME guidelines, effective from August 1, 2023.[4] The highlights of GMER 2023 in comparison to GMER 2019 are summarized in Table 1.[1,4–7]

Table 1.Comparison of GMER 2019 and GMER 2023

S. No.	GMER 2019 vs GMER 2023	
1	Length of phases	Under GMER 2019, phases I, II, III (part 1), and III (part 2) lasted 13, 12, 13, and 12 months, respectively. According to GMER 2023, these phases are now 12, 12, 12, and 18 months, respectively.
2	Duration and dedicated teaching hours of the foundation course	The foundation course hours have been slightly reduced from 175 to 165 hours. Previously, the course was scheduled to be conducted over the first month after admission to the MBBS program. Now, it is to be conducted over one week after admission, with the remaining hours distributed over six months at the college's discretion.

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3	Distribution of subjects across phases and subject-wise dedicated teaching hours	There have been changes in the subjects taught in each phase and the timing of the final summative examinations for those subjects. The phase and subject-wise teaching hours have also been adjusted. In Phase I, the teaching hours have decreased for several subjects: Anatomy (from 675 to 620), Physiology (from 495 to 440), Biochemistry (from 250 to 232), Community Medicine (from 52 to 40), and the Attitude, Ethics & Communication Module (AETCOM) (from 34 to 26). Additionally, hours for self-directed learning (SDL) have decreased in Anatomy, Biochemistry, and Physiology from 40, 25, and 20 hours respectively to 10 hours each, and SDL is no longer included in Community Medicine and AETCOM during Phase I. Consequently, total teaching hours in Phase I have reduced from 1736 to 1521 hours. Students will now take summative examinations for Anatomy, Physiology, and Biochemistry after Phase I. In Phase II, theory teaching hours have increased for Pathology (from 230 to 255), Microbiology (from 190 to 215), and Pharmacology (from 230 to 255), while they have decreased for Community Medicine (from 60 to 25), Forensic Medicine and Toxicology (FMT) (from 50 to 42), and Clinical Subjects (from 615 to 599). The hours for AETCOM remain the same at 37. Overall, teaching hours have increased from 1440 to 1521 hours. Students will take summative examinations for Pathology, Microbiology, and Pharmacology after Phase II. In Phase III (Part 1), dedicated teaching hours for Dermatology, Psychiatry, Respiratory Medicine, Radiology, and Anesthesia have been removed. Teaching hours for Medicine, Surgery, Obstetrics and Gynecology (OBG), Pediatrics, Orthopedics, FMT, Community Medicine, and AETCOM have increased, while hours for ENT and Ophthalmology have decreased. Overall, teaching hours have decreased from 1551 to 1521 hours. Students will take summative examinations for FMT and Community Medicine after Phase III (Part 1). In Phase III (Part 2), dedicated teaching hours for Dermatology, Psychiatry, Respiratory Medicine, Radiology, and Anesthesia have been added. Teaching hours for Medicine, Surgery, OBG, Pediatrics, and AETCOM have increased. ENT and Ophthalmology continue in Phase III (Part 2). Students will take summative examinations for ENT and Ophthalmology, along with the rest of the clinical subjects, after Phase III (Part 2). Overall, theory teaching hours and SDL hours for Medicine, Surgery, OBG, and Pediatrics throughout the entire MBBS course have increased. The duration of clinical postings has also increased: from 20 to 21 weeks for Medicine, Surgery, and OBG, and from 10 to 13 weeks for Pediatrics. There are also changes in the duration of clinical postings for other subjects. Previously, there was a 2-week clinical posting in Dentistry and Anesthesia during Phase III (Part 1). Now, in GMER 2023, Dentistry has a separate 1-week posting in Phase II, and Anesthesia has a 3-week posting in Phase III (Part 2).
4	Dedicated hours for sports and extracurricular activities	In Phase I, sports and extracurricular activity hours significantly decreased from 60 to 10. However, in Phase II, these hours have slightly increased from 28 to 35.
5	Dedicated teaching hours for early clinical exposure	In Phase I, hours of early clinical exposure decreased from 90 to 27 and were distributed equally among Anatomy, Physiology, and Biochemistry.
6	Introduction of Family Adoption Program	The Family Adoption Program, introduced in Phase I with 27 hours (covering a minimum of 3 families by each student), continues in Phase II with 30 hours and extends through Phase III (Part 1) with 31 hours. This initiative strengthens the learner-doctor program.

7	Introduction of the pandemic module	The pandemic module, introduced in Phase II, continues through Phase III (Part 2) with dedicated hours of 28 in Phase II, 18 in Phase III (Part 1), and 28 in Phase III (Part 2).
8	Duration of electives	The duration of electives has been reduced from 2 months to 1 month. Students will now attend two 15-day blocks of electives after Phase II (Part 1).
9	Summative assessment	Biochemistry and Microbiology will now have only one paper in the summative examination, worth 100 marks each. Previously, they had two papers each, with 100 marks per paper, totaling 200 marks.
		In GMER 2019, students had to achieve 50% or more marks separately in both theory and practical examinations to pass. According to GMER 2023, students now need to obtain at least 50% aggregate marks in both theory and practical, but no less than 40% in each. For subjects with two papers, students must secure a minimum of 40% in the aggregate of both papers to pass.
		Previously, GMER 2019 stated that supplementary examinations should be conducted within 3 months of the main examination. Under GMER 2023, supplementary examinations and the declaration of results must be completed within 3–6 weeks from the announcement of the main examination results. This timeline allows successful candidates to join the main batch for progression. If a candidate fails the supplementary examination for the first MBBS, they will join the batch of the next academic year. There will be no supplementary batches.
10	Other policy matters	The GMER 2023 schedule includes a mention of the NExT (National Exit Test), which was not part of the GMER 2019.
		No aspirant shall be allowed to take the NEET-UG unless they have completed 17 years of age on or before 31st January of the year in which they are appearing for the NEET-UG examination.
		No student designated to a medical institution shall seek migration to any other medical institution.
		Biometric attendance has been made compulsory from the next sessions.

Conflict of Interest: None

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